

SUBMIT - COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY WISCONSIN
Date Stamp (Received)
JUN 17 2015
Bayfield Co. Zoning Dept.

Permit #: 15-0018
Date: 6-28-15
Amount Paid: \$100
Refund: 6-28-15

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Stairway to
water

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE	<input type="checkbox"/> SANITARY	<input type="checkbox"/> PRIVY	<input type="checkbox"/> CONDITIONAL USE	<input type="checkbox"/> SPECIAL USE	<input checked="" type="checkbox"/> B.O.A.	<input checked="" type="checkbox"/> OTHER
Owner's Name:		Thomas Hoeltgen			Mailing Address:		28 Windsor Dr Elmhurst, IL 60126	
Address of Property:		Buckley Bay Dr & Rooster Rd			City/State/Zip:		Iron River, WI 54847	
Contractor:		Iron River, WI 54847			Contractor Phone:		Plumber:	
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Luke Gliniecki			Agent Phone:		715-298-9191	
PROJECT LOCATION		Legal Description: (Use Tax Statement)			Agent Mailing Address (include City/State/Zip):		54403	
SW 1/4, SE 1/4		Gov't Lot 2, Lot(s) 2, CSM 1316 V8 P91			PIN: (23 digits) 04-0241-2-47-0621-105-002		Recorded Document: (i.e. Property Ownership) Volume 988 Page(s) 522	
Section 21, Township 47 N, Range 8 W		Town of: Iron River			Lot Size		Acreage 3.32	
<input checked="" type="checkbox"/> Shoreland →		<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or landward side of Floodplain? If Yes—continue →			Distance Structure is from Shoreline: feet		Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> Non-Shoreland		<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes—continue →			Distance Structure is from Shoreline: feet		Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Value at Time of Completion * include donated time & material \$ 5000	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water						
							<input type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input checked="" type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City
							<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Well
							<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> _____	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary (Exists) Specify Type: _____	<input type="checkbox"/> _____
							<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> Basement	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/> _____
							<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/> _____	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/ service contract)	<input type="checkbox"/> _____
<input checked="" type="checkbox"/> Stairway to lake	<input type="checkbox"/> Foundation	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> None						

Existing Structure: (if permit being applied for is relevant to it)	Length:	Width:	Height:
Proposed Construction:	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	() X)		
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	() X)		
	with Loft	() X)		
	with a Porch	() X)		
	with (2 nd) Porch	() X)		
	with a Deck	() X)		
	with (2 nd) Deck	() X)		
	with Attached Garage	() X)		
	<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	() X)	
	<input type="checkbox"/> Mobile Home (manufactured date)	() X)		
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> Addition/Alteration (specify)	() X)		
	<input type="checkbox"/> Accessory Building (specify)	() X)		
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	() X)		
	<input type="checkbox"/> Special Use: (explain)	() X)		
	<input type="checkbox"/> Conditional Use: (explain)	() X)		
<input checked="" type="checkbox"/> Other: (explain)	Stairway to navigable waters	(44' x 90' ft)		

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____ Date: _____
(if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent: John D. Dilling Date: 6/11/15
(if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
Address to send permit: Luke Gliniecki 301 S. 20th St Wausau, WI 54403
Attach Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
(2) Show / Indicate: North (N) on Plot Plan
(3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
(4) Show: All Existing Structures on your Property
(5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(7) Show any (*): (*) Wetlands; or (*) Slopes over 20%

see attached drawing

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	> 150 Feet	Setback from the Lake (ordinary high-water mark)	0 Feet
Setback from the Established Right-of-Way	> 150 Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	45 Feet	Setback from the Bank or Bluff	0 Feet
Setback from the South Lot Line	5110 Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	> 500 Feet	20% Slope Area on property	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Setback from the East Lot Line	Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	N/A Feet	Setback to Well	N/A Feet
Setback to Drain Field	N/A Feet		
Setback to Privy (Portable, Composting)	N/A Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

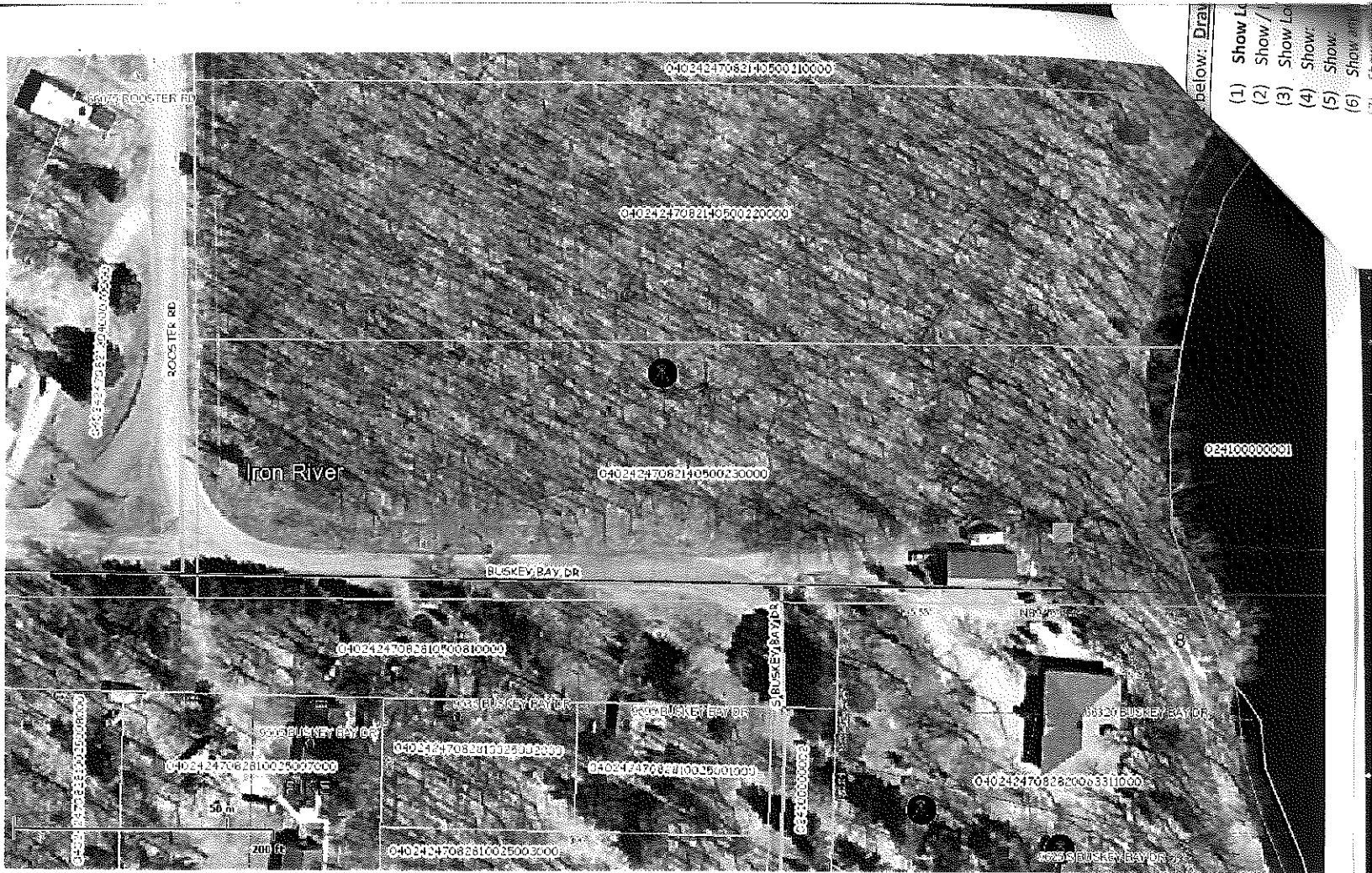
(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:	# of bedrooms:		Sanitary Date:
Permit Denied (Date):		Reason for Denial:		NA (none)	
Permit #: 150010		Permit Date: 1008-15			
Is Parcel a Sub-Standard Lot		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Deed of Record		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	(fused/Contiguous Lot(s))		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		Case #:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Was Parcel Legally Created		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Were Property Lines Represented by Owner		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Was Proposed Building Site Delineated		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Record: site well staked top of stream @ 75'		Inspected by: Leonard B. Murphy		Zoning District (P-1)	
Date of Inspection: 6-12-15				Lakes Classification (1-10)	
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached.)		I hereby certify that the information provided is true and correct to the best of my knowledge.		Date of Re-Inspection:	
I hereby certify that the information provided is true and correct to the best of my knowledge.		I hereby certify that the information provided is true and correct to the best of my knowledge.		Date of Approval: 6-24-15	
Signature of Inspector:		Signature of Applicant:		Date of Approval:	
Hold For Sanitary: <input type="checkbox"/>		Hold For BA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>	
Hold For Fees: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>		Hold For Fees: <input type="checkbox"/>	



SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
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PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

DATE RECEIVED
JUN 11 2015

ENTERED

Permit #: 15-0015
Date: 6-26-15
Amount Paid: \$1,080
Refund: 10-20-15

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co. Zoning Dept.

TYPE OF PERMIT REQUESTED →		<input checked="" type="checkbox"/> LAND USE		<input type="checkbox"/> SANITARY		<input type="checkbox"/> PRIVATE		<input type="checkbox"/> CONDITIONAL USE		<input type="checkbox"/> SPECIAL USE		<input type="checkbox"/> B.O.A.		<input type="checkbox"/> OTHER	
Owner's Name: JANE E. AUSTIN AND HAROLD T SKLEBAR		Mailing Address: 8065 5 1/2 ST SE		City/State/Zip: MONTPELIER, ND 58412		Telephone: 701-489-3490									
Address of Property: 62240 FIRE LAKE RD		City/State/Zip: IRON RIVER, WI 54847		Telephone: 701-251-8687											
Contractor: WOODTECH BUILDERS, INC.		Contractor Phone: 706-982-3157		Plumber: BAKEMAN PLUMBERS		Plumber Phone: 715-682-6050									
Authorized Agent: (Person Signing Application on behalf of Owner(s)) JED ESTELA		Agent Phone: 906-982-3157		Agent Mailing Address (include City/State/Zip): 219 E FREDERICK ST. IRONWOOD, WI 54938		Written Authorization Attached: X Yes <input type="checkbox"/> No									
PROJECT LOCATION: N 1/2 1/4 NW 1/2 NW SE SE		Legal Description: (Use Tax Statement)		PIN: (23 digits) 04-024-2-47-08-05-4 04-000-1000		Recorded Document: (i.e. Property Ownership) Volume 846		Page(s) 321, 169							
Section 5, Township 47 N, Range 8 W		Town of: IRON RIVER		Lot Size: 335' x 1050'		Acreage: 10									
<input checked="" type="checkbox"/> Shoreland →		<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If Yes—Continue →		Distance Structure is from Shoreline: feet		<input type="checkbox"/> Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
<input type="checkbox"/> Non-Shoreland		<input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes—Continue →		Distance Structure is from Shoreline: 200 feet											

Value at Time of Completion *include donated time & material \$ 349,000	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water	New Construction		<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City	
							Addition/Alteration		<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary	Specify Type: CONVENTIONAL	<input checked="" type="checkbox"/> Well
							Conversion		<input type="checkbox"/> 2-Story	<input type="checkbox"/> 3	<input type="checkbox"/> Sanitary/Exists	Specify Type: _____	<input type="checkbox"/>	
							Relocate (existing bldg)		<input checked="" type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/>		
							Run a Business on Property		<input type="checkbox"/> No Basement	<input type="checkbox"/> Foundation	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)	<input type="checkbox"/> Compost Toilet	<input type="checkbox"/>

Existing Structure: (if permit being applied for is relevant, to it)	Length: 44' , 24'	Width: 27' + 28'	Height: 26'
Proposed Construction:			

Proposed Use	Proposed Structure	Dimensions	Square Footage	<input checked="" type="checkbox"/> Principal Structure (first structure on property)	(26'27' x 44')	1184
				<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	()	
				<input type="checkbox"/> with Loft (2nd floor)	(27' x 21')	602
				<input type="checkbox"/> with a Porch	(23' x 8')	184
				<input type="checkbox"/> with (2 nd) Porch	()	
				<input type="checkbox"/> with a Deck	(22' x 6')	132
				<input type="checkbox"/> with (2 nd) Deck	()	
				<input type="checkbox"/> with Attached Garage	(28' x 24')	672
				<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	()	
				<input type="checkbox"/> Mobile Home (manufactured date)	()	
<input type="checkbox"/> Addition/Alteration (specify)	()					
<input type="checkbox"/> Accessory Building (specify)	()					
<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	()					
<input type="checkbox"/> Rec'd for Issuance						
<input type="checkbox"/> JUN 26 2015						
<input type="checkbox"/> Conditional Use: (explain)						
<input type="checkbox"/> Secretarial Staff						
<input type="checkbox"/> Other: (explain)						

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): _____ Date: _____
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Steve Date: 6/9/2015
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit: WOODTECH BUILDERS / 219 E Frederick St. Ironwood, WI 54938
APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Attach
If you recently purchased the property send your Recorded Deed

Building Expenses
Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of:

Proposed Construction
- (2) Show / Indicate:

North (N) on Plot Plan
- (3) Show Location of (*):

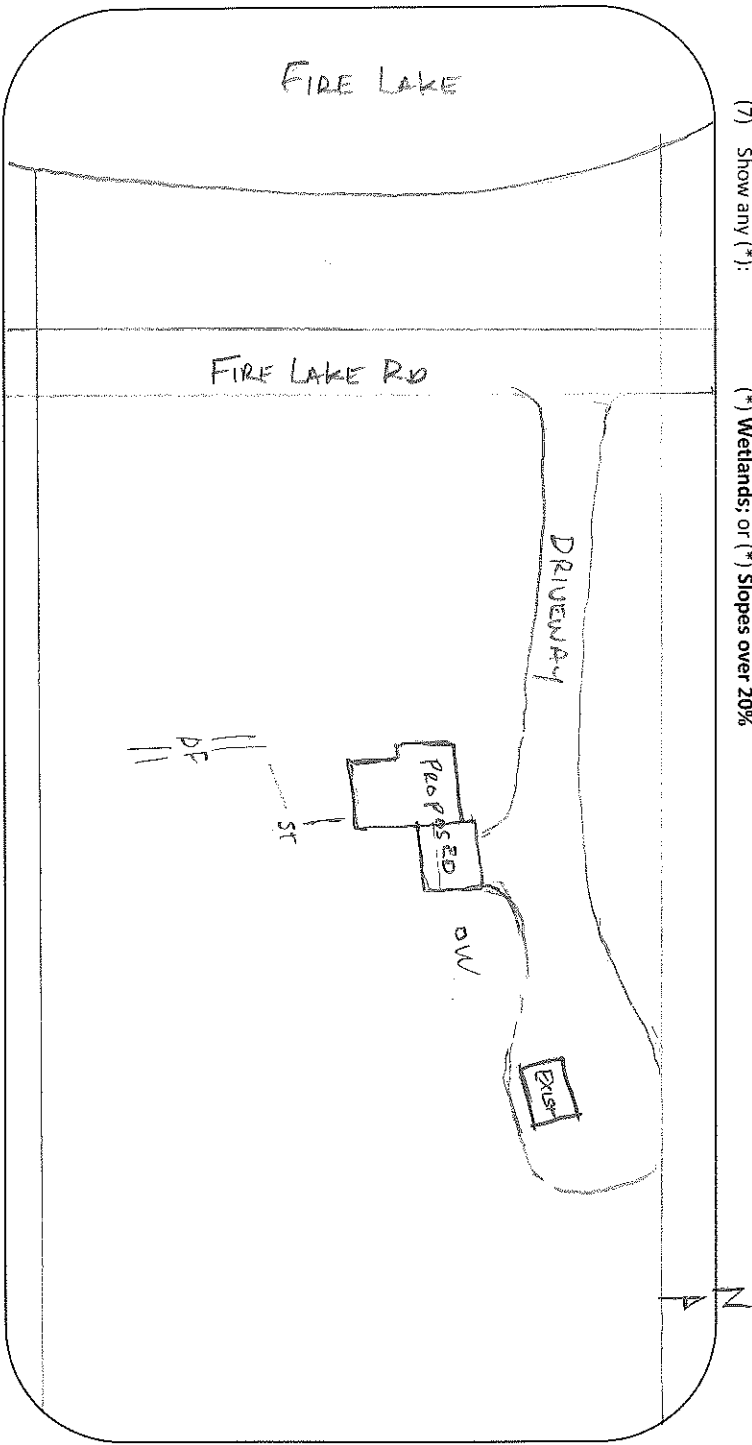
(*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show:

All Existing Structures on your Property
- (5) Show:

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*):

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*):

(*) Wetlands; or (*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	140' ± Feet	Setback from the Lake (ordinary high-water mark)	200' ± Feet
Setback from the Established Right-of-Way	107' ± Feet	Setback from the River, Stream, Creek	Feet
Setback from the North Lot Line	114' ± Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	175' ± Feet	Setback from Wetland	Feet
Setback from the West Lot Line	200' ± Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	750' ± Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	10' Feet	Setback to Well	20 Feet
Setback to Drain Field	30' Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 15-735	# of bedrooms: 3	Sanitary Date: 6-25-15
Permit Denied (Date):		Reason for Denial:		
Permit #: 15-0015		Permit Date: 6-20-15		
Is Parcel a Sub-Standard Lot		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is Parcel in Common Ownership		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is Structure Non-Conforming		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Granted by Variance (B.O.A.)		Previously Granted by Variance (B.O.A.)		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Case #:		Case #:		
Was Parcel Legally Created		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	
Was Proposed Building Site Delineated		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was Property Surveyed	
Inspection Record: site well stalked. cleared + GUARDED FOR SITE PREP.		Mitigation Required		Affidavit Required
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of Inspection: 6-17-15		Inspected by: J. COOPER		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached.)		Zoning District (R-1)		
NECESSARY FOR PERMIT + INSPECTIONS SITE BE COMPLETED WITH UTILITY APPLICABLE.		Lakes Classification (3 (Five))		
Signature of Inspector: [Signature]		Date of Approval: 6-18-15		
Hold For Sanitary: [X] [Signature]		Hold For TBA: <input type="checkbox"/>		Hold For Affidavit: <input type="checkbox"/>
		Hold For Fees: <input type="checkbox"/>		<input type="checkbox"/>

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
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PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Required)

FEB 26 2015

Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Permit #:	15-0883
Date:	10-23-15
Amount Paid:	\$450
Refund:	10-20-15

ENTERED

\$450

by 10-25-15

TYPE OF PERMIT REQUESTED: <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVATE <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER		
Owner's Name: Tall Timbers LLC	Mailing Address: 69665 Island Blvd Iron River, WI	City/State/Zip: 54847
Address of Property: 69665 Island Blvd	City/State/Zip: same	Telephone: 715 293-1624
Contractor:	Contractor Phone:	Plumber:
Authorized Agent: Barb Anich	Agent Phone: 715-293-1624	Agent Mailing Address (include City/State/Zip):
PROJECT LOCATION: 1/4, 1/4	Gov't Lot: 3	Lot(s): 801
Legal Description: (Use Tax Statement)	CSM: 5,253	Vol & Page: 76-79
Section: 2, Township: 47 N, Range: 8 W	Town of: Iron River	Block(s) No.:
Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? <input type="checkbox"/>	Distance Structure is from Shoreline: feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Property/Land within 1000 feet of Lake, Pond or Flowage if yes--continue <input checked="" type="checkbox"/>	Distance Structure is from Shoreline: feet	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Non-Shoreland		
Recorded Document: (i.e. Property Ownership) 1102	Volume: 128	Pages: 128
Subdivision: 2nd Add. to Long Lake	Lot Size:	Acreage: 1.94

Value at Time of Completion * include donated time & material \$150,000	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	Specify Type: (New) Sanitary	<input checked="" type="checkbox"/> City
<input type="checkbox"/> Addition/Alteration	<input checked="" type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> (New) Sanitary	Specify Type: (Existing) Sanitary	<input checked="" type="checkbox"/> Well
<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/>	<input type="checkbox"/> 3	<input checked="" type="checkbox"/> Sanitary (Exists)	Specify Type: Privy (Pit) or Vaulted (min 200 gallon)	<input type="checkbox"/>
<input type="checkbox"/> Relocate (existing bldg)	<input checked="" type="checkbox"/> Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Portable (w/service contract)		
<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> No Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None		
<input type="checkbox"/>	<input type="checkbox"/> Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Compost Toilet		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None		

Existing Structure: (if permit being applied for is relevant to it)	Length: 7'	Width: 38'	Height: 26'
Proposed Construction:	Length:	Width:	Height:

Proposed Use	Principal Structure (first structure on property)	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Residence (i.e. cabin, hunting shack, etc.) with Loft with a Porch with (2nd) Deck with a Deck with (2nd) Deck with Attached Garage	(47' x 38') (10' x 16') (10' x 31') (10' x 31') (10' x 31') (10' x 31')	1,316 160 310 310 310
<input type="checkbox"/> Commercial Use	Bunkhouse w/ () sanitary, or sleeping quarters, or cooking & food prep facilities	() () () () () ()	() () () () () ()
<input type="checkbox"/> Municipal Use	Mobile Home (manufactured date)	() () () () () ()	() () () () () ()
	Addition/Alteration (specify)	() () () () () ()	() () () () () ()
	Accessory Building (specify)	() () () () () ()	() () () () () ()
	Accessory Building Addition/Alteration (specify)	() () () () () ()	() () () () () ()
	Special Use: (explain)	() () () () () ()	() () () () () ()
	Conditional Use: (explain)	() () () () () ()	() () () () () ()
	Other: (explain)	() () () () () ()	() () () () () ()

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Owner(s): X
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent: X Barb Anich
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
Address to send permit same as above
Date 2-25-2015
Attach ✓

or Sketch your Property (regardless of what you are applying for)

Barb Andie
715-292-1636
www.talltimberscabins.com

Iron River WI
69665

Proposed Construction
North (N) on Plot Plan
(*) Driveway and (*) Frontage Road (Name Frontage Road)
All Existing Structures on your Property
(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
(*) Wetlands; or (*) Slopes over 20%

Show / Indicate:
Show Location of (*):
(4) Show:
(5) Show:
(6) Show any (*):
(7) Show any (*):

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	63 Feet	Setback from the Lake (ordinary high-water mark)	73' 83 Feet
Setback from the Established Right-of-Way	30 Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	30 Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	N/A Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	N/A Feet	20% Slope Area on property	Yes No
Setback from the East Lot Line	N/A Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	Feet	Setback to Well	50 Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	N/A Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)

Permit Denied (Date):

Sanitary Number: 15-0003

Reason for Denial:

Sanitary Date: 10/23/15

Permit #: 15-0003

Permit Date: 10/23/15

Is Parcel a Sub-Standard Lot: ☐ Yes ☒ No

Is Parcel in Common Ownership: ☐ Yes ☒ No

Is Structure Non-Conforming: ☐ Yes ☒ No

Granted by Variance (B.O.A.): ☐ Yes ☒ No

Case #: 15-245

Were Property Lines Represented by Owner: ☒ Yes ☐ No

Was Property Surveyed: ☒ Yes ☐ No

Inspection Record: Inspection by Dan, Rob, Josh, & Alyssa on 10/23/15. All setbacks met. Required setbacks = 63' from center of road or 30' to R.O.W., 75' to town, 20' to north side property line.

Date of Inspection: 5/12 + 6/23

Inspected by: Jacob R. Murphy

Conditions: Town, Committee on Board Conditions Attached? ☐ Yes ☒ No (If No they need to be attached)

Signature of Inspector: [Signature]

Date of Approval: 10-23-15

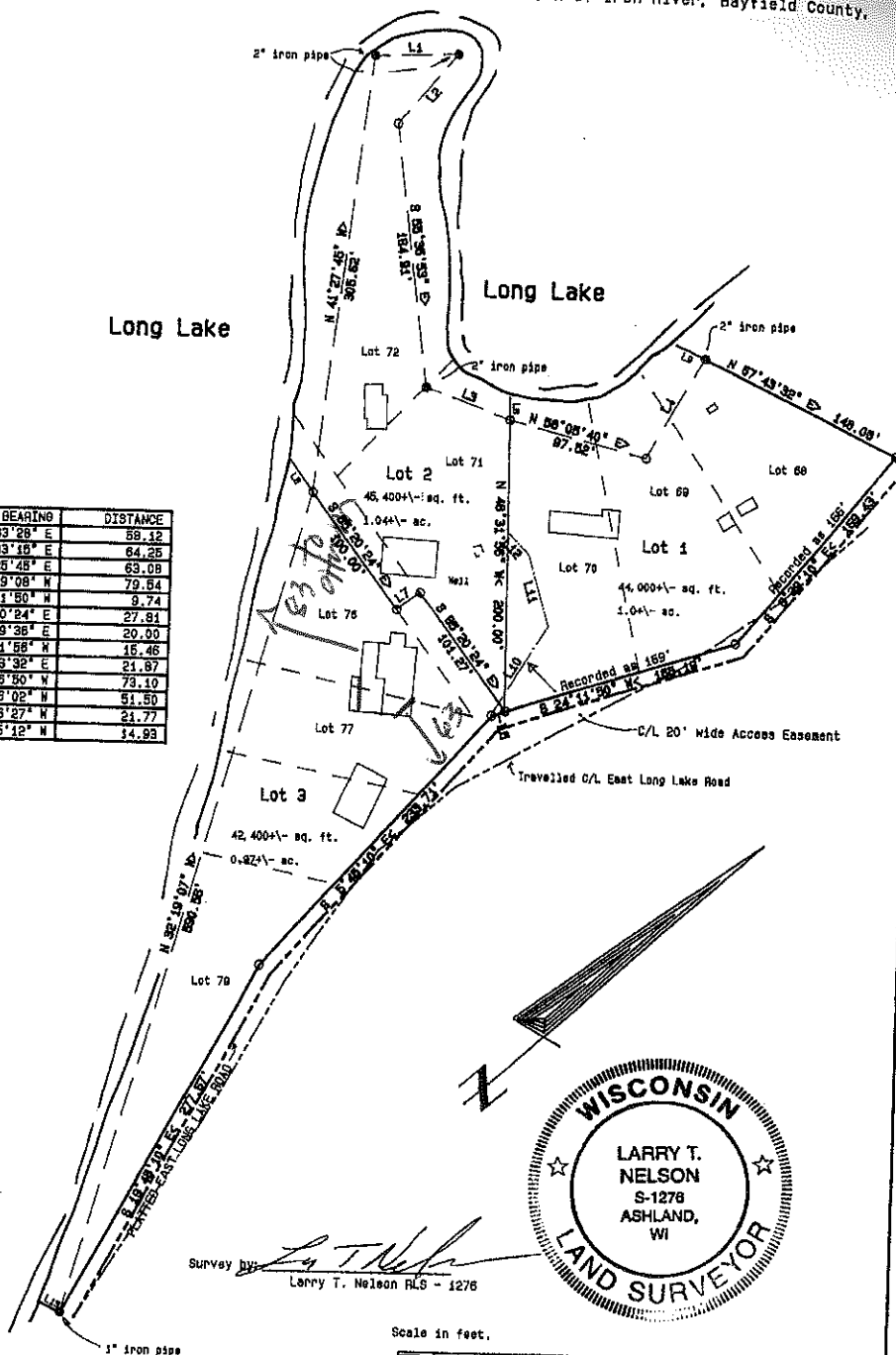
Hold For Sanitary: ☐ Hold For TBA: ☐ Hold For Affidavit: ☐ Hold For Fees: ☐

EXISTING HOUSE TO BE REMOVED. CONSTRUCTION SITE BEST MANAGEMENT PRACTICES SHALL BE EMPLOYED TO CONTROL RUNOFF.

REGISTER'S OFFICE
Bayfield County, WIS.
RECORDED AT 2 P. M.
ON SEP 21 1993 IN
Vol. 5 of CSM page 252
S.S. Doc. No. 407984
Otto Korpela
252 Incl REGISTER OF DEEDS

Located in Lots 68 - 72, Lots 76 - 79 and the alley lying north of Lot 76, all in the SECOND ADDITION TO LONG LAKE, lying in Gov't. Lot 2 of Section 2, T. 47 N., R. 8 W., in the Town of Iron River, Bayfield County, Wisconsin.

LINE	BEARING	DISTANCE
L1	N 39° 33' 28" E	59.12
L2	S 8° 43' 15" E	64.25
L3	N 81° 25' 48" E	63.08
L4	N 18° 59' 08" W	79.54
L6	S 24° 11' 50" W	9.74
L7	S 95° 20' 24" E	27.81
L8	N 4° 39' 36" E	20.00
L9	N 49° 31' 58" W	16.46
L10	N 67° 43' 32" E	21.87
L10	N 16° 26' 50" N	73.10
L11	N 64° 45' 02" W	51.50
L12	S 87° 26' 27" W	21.77
L13	S 70° 15' 12" W	14.93



Gov. Lot. 2 2-47-8

255

Legend

- Monument, as noted, found in place.
- 1-1/4" x 30" iron pipe, weighing 1.00 #/lin. ft., est.

Client - Martinez

Scale: One inch = 100 feet
Bearings are true
September 14, 1932
Sheet 1 of 2 sheets

NELSON

SURVEYING AND
ENGINEERING, INC.

LAND SURVEYING AND PROFESSIONAL ENGINEERING SERVICES

101 WEST MAIN STREET
FIRST FLOOR
APRILAND, WI 54804
(715) 432-2892

1402 N

20668 Lot 1
20669 - Lot 2
20674 - Lot 3